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FAX TRANSMITTAL COVER SHEET

Date: June 1, 2001

No. of pages: 8 (including this page)

To: Kevin Anderson

From: Gregg Kromrey

Company:

Re:

Your Ref.:

Our Ref.: 302.167.101

Fax No.: (952) 703-0490

Phone No.: (612) 573-0445

Phone No.:

Documents being sent: Figures 1A, 1B, 2A, 2B, 3A, 3B & 3C

Message:

- Stack figures 1A & 1B above one another on a single page
- Stack figures 2A & 2B above one another on a single page.

It would be great if you could get these done by Wednesday, June 6th. Thanks, Gregg

Please notify us at 612-573-2000 if all pages are not received.

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS ATTORNEY-PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ADDRESS LISTED ABOVE VIA THE U.S. POSTAL SERVICE. THANK YOU.

email ⇒ gkromrey@abc.law.com



Braille

IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE

Inv nt n(s): Mark W. Minne

Confirmation N .: 5821

Application No.: 10/051,571

Examiner: Datskovsky, M.

Filing Date: Jan. 17, 2002

Group Art Unit: 2835

Title: MEMORY CARD ACCESS INDICATOR SYSTEM

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

(X) Response/Amendment () Petition to extend time to respond
() New fee as calculated below () Supplemental Declaration
(X) No additional fee (Address envelope to "Mail Stop Non-Fee Amendment")
(X) Other: Copy of Exhibits A and B at Examiner's Request (fee \$ 86)

CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	20	MINUS	22	= 0	X \$18	\$ 0
INDEP. CLAIMS	4	MINUS	3	= 1	X \$86	\$ 86
[] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM					+ \$290	\$ 0
EXTENSION FEE	1ST MONTH \$110.00	2ND MONTH \$420.00	3RD MONTH \$950.00	4TH MONTH \$1480.00		\$ 0
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 86

Charge \$ 86 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450.

Date of Deposit: Feb. 6, 2004

Typed Name: Steven E. Dick

Signature: Steven E. Dick

Respectfully submitted,

Mark W. Minne

By Steven E. Dick

St ven E Dick

Attorney/Agent for Applicant(s)

Reg. No. 38,431

Date: Feb. 6, 2004